



# United States Department of the Interior

NATIONAL PARK SERVICE

1849 C Street, N.W.

Washington, D.C. 20240

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P2217(2460)

Memorandum

To: Park Ranger David "Andy" Atkins

Through: Chief, RM&VP

From: Medical Standards Program Manager (acting)

Subject: Recommendation for Light Duty

As documented on the attached Medical Review Form, under the National Park Service (NPS) Medical Standards Program, Director's Order/Resource Manual-57 (DO/RM-57), you are not medically qualified to be a Park Ranger Law Enforcement (LE) because of your medical condition (Insulin Dependent Diabetes Mellitus [IDDM]). You attended the NPS periodic medical examination on August 5, 2004 and were found not medically cleared for arduous duty as a National Park Service LE Officer.

As Medical Standards Program Manager, I am obligated to ensure that you are in full compliance with the waiver granted to you on May 29, 2002 and the waiver renewal granted to you on June 30, 2003. The initial decision to grant you a waiver was based on your very compelling documentation and presentation of your medical condition with promised improvement in control of your diabetes, weight loss and exercise program as well as consistent blood glucose monitoring and logs, and a close working association with your endocrinologist to the Medical Review Board on June 11 and 12, 2002. Your waiver renewal was also based upon continued compliance with the waiver and continued improvement in control of your diabetes.

You have not been in compliance with your medical waiver of June 30, 2003. Prior to the lab results; to include an Hgb A1c of 9.4, dated February 24, 2005 and faxed on March 1, 2005, the last lab report and Hgb A1c you submitted was dated October 6, 2002 and faxed to our office on May 29, 2003. You failed to provide copies of your most recent Hgb A1c test at the time of your NPS periodic medical exam on August 5, 2004. You have not submitted any Hgb A1c test results from 2003 or 2004. On August 30, 2004, Dr. Candice Silvestre, from Comprehensive Health Services, Inc.(CHS), requested information from your endocrinologist to include;

*"updated information concerning your diabetes treatment since your last examination on 06/17/2002, including information regarding any episodes of*

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*hypoglycemia or ketoacidosis and any hospitalizations. Please include evidence of good diabetic control (such as fasting blood sugar results and Hgb A1c level). Include information regarding any target organ damage to your cardiovascular system, kidneys, eyes, nervous system and cognitive abilities. Also provide specific information related to any episodes of pump failure or pump malfunction."*

You faxed incomplete information the WASO Medical Standards Program Office on March 1, 2005. I understand from our phone conversation on March 17, 2005 that Dr. Martin has been titrating your insulin pump in an attempt to gain tighter control over your diabetes. Your supervisor Kim Korthuis has requested assistance in the implementation of an appropriate exercise plan on your behalf. This needs to be addressed by your personal physician in conjunction with Dr. Larry Saladino, NPS/LEO Medical Review Officer at CHS. However, to date you have only submitted (2) exercise logs and have not been submitting exercise logs to your supervisor as required in your initial waiver and your waiver renewal.

Dr. Saladino recently reviewed the information which you faxed and provided medical opinions and information that has guided my initial recommendation. In making the determination for recommendation of light duty, I am guided by the following facts unique to your case:

1. "fingersticks < 65 almost every day between 02/02/05 and 02/18/05 ... Hgb A1c reading of 9.4% on 02/21/05 correlates with a mean plasma glucose ~ 255 over last 60-90 days, so his diabetes does not appear to be well controlled". (Dr. Saladino, (03/11/05).
2. Hypoglycemia can affect attention, concentration, thinking, judgment, decision-making, reaction time and hand-eye coordination, along with causing irritability, confusion and rapid changes in the level of consciousness.
3. The risk of hypoglycemia is higher for individuals who use insulin, especially "intensive insulin therapy", such as an insulin pump. The major job related factor that increases the risk of hypoglycemia for police officers is disruption of meals. The duties of an NPS/LEO are by their nature arduous and hazardous, and are performed under variable and unpredictable working conditions to include unplanned mealtimes, possibility of missed meals, potential for hypoglycemia.

The NPS has generally not recommended light duty restrictions be placed on employees until a final decision on medical qualifications, by Comprehensive Health Services, Inc. (CHS), has been determined. However, when CHS and the NPS Medical Standards Program Manager receive information that a potentially dangerous medical condition exists, they do recommend to the ranger's supervisor that immediate arduous duty restrictions be implemented pending the outcome of definitive testing.

I am recommending that you be placed on temporary light duty status until completion of the testing requested by CHS and until CHS provides the me with information that allows me to determine that you are not a present high risk safety concern for the NPS. In general, while in light duty status I recommend that you are not allowed to perform the full scope of the arduous duties of your position. Therefore, while in light duty status

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I recommend that you do not wear visible defensive equipment, or work in any law enforcement, emergency medical, or search and rescue capacity that may endanger your health and safety or the health and safety of the public we serve. This recommendation is based on DO/RM-9, 3-1.2.2 and I am NOT recommending any restriction of your statutory law enforcement authority. You must comply with terms of your waiver and take responsibility for having your endocrinologist provide all of the information requested in Dr. Silvestre's letter dated August 30, 2004, "along with any additional information requested by Dr. Saladino, based on his review of the information that you recently faxed to NPS.

Andy, it is quite evident that you made a positive impression on the Medical Board that you were sincere in gaining control of your diabetes, weight and general health. I am confident that you will provide CHS with the necessary documentation and am looking forward to working with you as you gain control of your diabetes, weight and general health, to get your waiver back into compliance. I am available to answer any questions you may have and to provide any assistance I can at WASO Medical Standards Program at (202) 513-7019.